

**2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P40325

**FILED**  
**Mar 30, 2016**  
**Secretary of State**  
**CC8994602118**

**Entity Name:** UNITED FINANCIAL CASUALTY COMPANY

**Current Principal Place of Business:**

6300 WILSON MILLS ROAD  
MAYFIELD VILLAGE, OH 44143

**Current Mailing Address:**

6300 WILSON MILLS ROAD  
MAYFIELD VILLAGE, OH 44143 US

**FEI Number: 36-3298008**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

CHIEF FINANCIAL OFFICER  
200 E. GAINES ST.  
TALLAHASSEE, FL 32399-0000 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name BEMER, PATRICIA O.  
Address 6300 WILSON MILLS ROAD  
City-State-Zip: MAYFIELD VILLAGE OH 44143

Title PRESIDENT, DIRECTOR  
Name BISSLER, MICHAEL W  
Address 6300 WILSON MILLS ROAD  
City-State-Zip: MAYFIELD VILLAGE OH 44143

Title DIRECTOR  
Name HISEK, JEANETTE L.  
Address 6300 WILSON MILLS ROAD  
City-State-Zip: MAYFIELD VILLAGE OH 44143

Title DIRECTOR  
Name KAMPF, WILLIAM R.  
Address 6300 WILSON MILLS ROAD  
City-State-Zip: MAYFIELD VILLAGE OH 44143

Title TREASURER, DIRECTOR  
Name MAHER, KEVIN P.  
Address 6300 WILSON MILLS ROAD  
City-State-Zip: MAYFIELD VILLAGE OH 44143

Title ASST. SECRETARY  
Name ROSE, MARGARET A.  
Address 6300 WILSON MILLS ROAD  
City-State-Zip: MAYFIELD VILLAGE OH 44143

Title SECRETARY  
Name CORWIN, PATRICIA M  
Address 6300 WILSON MILLS ROAD  
City-State-Zip: MAYFIELD VILLAGE OH 44143

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: MARGARET A. ROSE**

**ASSISTANT SECRETARY 03/30/2016**

Electronic Signature of Signing Officer/Director Detail

Date